PATENT APPLIATION FEE DETERMINATION RECOP

Application or Docket Number

10/531433

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER 2111 | | |
|--|--|--|---|-------------------------------|-------------------------|----------------------------------|------------|---------------------|------------------------|------------|----------------------------|------------------------|--|
| | · | | (Column | 1) | (Column 2) | | | TYPE | | OR | OTHER THAN SMALL ENTITY | | |
| U.S | . NATIONAL S | STAGE FEES | | | | | | RATE | FEE | | RATE | FEE | |
| BAS | IC FEE | | SMALL ENT. = \$ 150 | | LARC | SE ENT. = \$ 300 | 7 | BASIC FEE | | OR | BASIC FEE | 300 | |
| ĘΧΑ | MINATION FE | E | Satisfies PCT Article 33(1)- (4) = \$50/\$ 100 | | | her situations = 100 / \$ 200 | 1 | EXAM FEE | | | EXAM FEE | 200 | |
| SEA | RCH FEE | | U.S. is ISA = \$50/\$100 ALL other countries: = \$200/\$400 | | | her situations = 250 / \$ 500 | | SEARCH FEE | | • | SEARCH FEE | 400 | |
| FEE | FOR EXTRA S | PEC. PGS. | minu | s 100 = | | / 50 = |] | X \$ 125 = | ٠. | | X \$ 250 = | · · · | |
| TOTAL CHARGEABLE CLAIMS | | | 17 min | us 20 = | • | |] | X \$ 25 = | | OR | X \$ 50 = | | |
| INDI | EPENDENT CL | AIMS | / mi | * | | | X \$ 100 = | | OR | X \$ 200 = | | | |
| MUL | TIPLE DEPENI | DENT CLAIM PRI | SENT | | | | | +\$180= | | OR | + \$ 360 = | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 " " | | | | | | | 17 32. | TOTAL | | OR | TOTAL | 400 | |
| CLAIMS AS AMENDED - PART II 415-05 (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 17 | Minus | ** 0 | 20 | | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | • / | Minus | *** | 3 | = | 1 | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | · | OR | + \$ 360 = | | |
| | | | | | | - | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. | | |
| | | (Column 1) | | (Colur | nn 2) | (Column 3) | | | | | • | · | |
| AMENOMENT 8 | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | EST BER SUSLY | PRESENT , EXTRA. | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | |]. | X \$ 25 = | | OR | X \$ 50 = | · | |
| | Independent | • | Minus | ### · | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | · | OR | + \$ 360 = | | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| ** | If the "Highest No " If the "Highest No | umn 1 is less than th umber Previously Pa umber Previously Pai mber Previously Pain | id For IN THIS SP. Id For IN THIS SP. | ACE is les ACE is les | s than '2 s than '3' | 0", enter "20". ', enter "3". | nd in t | ne appropriate box | in column 1, | | | | |